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Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

# UNITED STATES DISTRICT COURT

for the

District of Oregon

**EUGENE Division** 

|   | Case No.         | 6:20-cv-00344-HZ                        |  |
|---|------------------|---|--|
| Plaintiff(s)  (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)                     | )<br>)<br>)<br>) | (to be filled in by the Clerk's Office) |  |
| Marion County Sheriffs Dept.<br>Michael Struk A262<br>Brian Danielson A255  | ) ) )            |   |  |
| Defendant(s)  (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.) | )                |   |  |

#### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

## I. The Parties to This Complaint

#### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

| Name                     | Lishua Levi Smith     |
|--------------------------|-----------------------|
| All other names by which |                       |
| you have been known:     |                       |
| ID Number                | 12680963              |
| Current Institution      | Marion County dail    |
| Address                  | 4000 Aumsville Awy SE |
|                          | Salem OR 97317        |
|                          | City State Zip Code   |

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

| Defendant No. 1         |                                       |
|-------------------------|---------------------------------------|
| Name                    | Michael Strub                         |
| Job or Title (if known) | Marion County Sheriff                 |
| Shield Number           | A262                                  |
| Employer                | Marion County Sheriff Dent.           |
| Address                 | 4000 ALMSVINE HWW SE                  |
|                         | Solem OR 97317  City State Zip Code   |
|                         | Individual capacity Official capacity |
| Defendant No. 2         |                                       |
| Name                    | Brian Vanielson                       |
| Job or Title (if known) | Marion County Sheriff                 |
| Shield Number           | A255                                  |
| Employer                | Morion County Sheriff Dept.           |
| Address                 | 4000 Aumsville Hay SE                 |
|                         | Salem OR 97317 City State Zip Code    |
|                         | Individual capacity Official capacity |

|   | Name  Job or Title (if known)  Shield Number  Employer  Address  Address  Marion County Sheriff  Dept  Marion County Sheriff  County Sheriff |
|---|--|
|   | Defendant No. 4  Name  Job or Title (if known)  Shield Number  Employer  Address   City State Zip Code  Individual capacity Official capacity  |
| Un<br>imi<br>Fed                              | der 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or munities secured by the Constitution and [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of deral Bureau of Narcotics, 403 U.S. 388 (1971)</i> , you may sue federal officials for the violation of certain institutional rights.  Are you bringing suit against (check all that apply):  Federal officials (a <i>Bivens</i> claim)  State or local officials (a § 1983 claim)  |
| B.<br>States Sa<br>Shiment of<br>sof the peop | Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?  South taken (Amendment 1 to Amendment xxvii) (1791) Congress Shall make no law respecting an religion, or prohibiting the Gree exercise thereof; or abridging the freedom of Speech, and partition the Covernment for recress greateness.   |
| C.  | Plaintiffs suing under <i>Bivens</i> may only recover for the violation of certain constitutional rights. If you are suing under <i>Bivens</i> , what constitutional right(s) do you claim is/are being violated by federal officials?   |

| •  | Pro Se 1       | 1 (Rev. 12/1                      | 5) Complaint for Violation of Civil Rights (Prisor  |   |  |  |                                       |
|--|----------------|-----------------------------------|---|---|--|--|---------------------------------------|
| -  | 110 30 1       | 4 (Rev. 12/1                      | ) Complaint for Violation of Civil Algits (Fisoi  | (61)  | . •  | <del>22-8</del>  | =                                     |
| •  | •              |                                   |   |   |  |  |                                       |
|  | •              |                                   |   |   |  |  |                                       |
|  | •              |                                   |   |   | ·  |  |                                       |
|  |                | D                                 | Section 1983 allows defendants to   | he found liable only when   | they have acted "und   | er color of any  |                                       |
| and Phys                                     |                |                                   | statute, ordinance, regulation, custo 42 U.S.C. § 1983. If you are suing of state or local law. If you are suing federal law. Attach additional page 15cm # 425/2) did under color of                     | om, or usage, of any State<br>under section 1983, explain<br>ng under <i>Bivens</i> , explain h | or Territory or the Disain how each defendant according to the contract of the | strict of Columbia."<br>at acted under color<br>acted under color of | -                                     |
| prohibiti<br>cassembl<br>cinstruc<br>and der | in the         | free exi<br>petition<br>to ho     | tisch 42521 810 anch celet of the city the forest ment for redirect griph me and the other 17 imates service of my religious practice here in Marion County South   | L Freedern of Speech, or<br>wantes. This occurred i<br>to return to our cells                   | n of press; or the wallen Deputy Strub of Strub of The Host action I   | right of the people collect Deputy Donice Mass collectively          | e peaceablis<br>elean and<br>punished |
| ···  | III.           | Prison                            | er Status   |   |  |  |                                       |
|  |                | Indicat                           | whether you are a prisoner or othe  | r confined person as follo  | WS (check all that apply):   |  | •                                     |
|  |                | X                                 | Pretrial detainee   | r   | ··· (-··· - ··· - ··· - · · · · · · · ·  |  |                                       |
|  |                |                                   | Civilly committed detainee  |   |  |  |                                       |
|  | , .            |                                   | Immigration detainee  |   | •  |  |                                       |
|  |                |                                   | Convicted and sentenced state pris  | oner  |  |  |                                       |
|  |                |                                   | Convicted and sentenced federal p   | isoner  | <b>3</b>   |  |                                       |
| ·.   |                |                                   | Other (explain)   |   |  |  |                                       |
| J  | IV.            | Stateme                           | nt of Claim   |   |  |  |                                       |
|  |                | alleged<br>further of<br>any case | briefly as possible the facts of your<br>wrongful action, along with the date<br>etails such as the names of other pe<br>s or statutes. If more than one clain<br>it of each claim in a separate paragra  | s and locations of all reley<br>rsons involved in the even<br>n is asserted, number each        | vant events. You may ats giving rise to your a claim and write a sho   | wish to include claims. Do not cite                                  |                                       |
|  |                | A.                                | If the events giving rise to your cla   | im arose outside an institu   | ntion, describe where a  | and when they arose.   |                                       |
|  |                |                                   |   | -   | ·  |  |                                       |
| •  |                |                                   | NIA   |   |  |  |                                       |
|  | •              | В.                                | If the events giving rise to your cla   | im grass in an institution  | describe where and w   | then they gross  |                                       |
| بنانحواده                                    | cry action     | a by Ma                           | on the events giving rise to your classics of approximately 7:30 Am reliance and an test and free exercise portion of the previous of Machiner articles are previous of the previous of Machiner articles | gious moterials were rem<br>he premisis of Marion es<br>he Cost amendment to                    | oved from my posses<br>ounty Correctional for<br>the united states   | esion by force or filling in Please Violate                          | ion of MCCh<br>On of Abov             |
| Fice &                                       | <u>cerción</u> | right to                          | ceremple and operationment be   | FICHS OF HAL LIMITED  | i states constituti  | (1) -3/ hoth portu   | eich do eac                           |
| MCCF-  |                |                                   |   |   |  | Page 4 of  |                                       |

#### Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

C. What date and approximate time did the events giving rise to your claim(s) occur?

Both events occurred on Jan 17, 2020 1) approximately 7:20Am =2) at 2:50pm

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?

Was anyone else involved? Who else saw what happened?) I was told by two Marion County

Sheriffs to get rid of my religious books, then later that day the same two officers Michael

Shruh AALA and Brian Danielson AABS both denied me my religious Services due to someone elses

talking in carridor when I never even made it out of the unit. They punished me as

a colective to a group. Is immates in total where refused so I have one person who is

willing to admit seeling this but there are concras on all units that will show I

never left the unit. I believe this to be retaliation do to the previous argument
earlier in the day Cer my religious books which is a deliberate inderterance to

My constitutional rights.

My witness is Damian Aliester Bragdon # 15919049

### V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

loss of interial of religious pratice that I can not get back.

## VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Money damages in an amount of \$ 250,0000 and any other action court deems fair and proper.

## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

| A. | Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?  |
|----|---|
|    | X Yes   |
|    | □ No  |
|    | If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s). |
|    |   |
|    | Marion Country Sail   |
| В. | Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?                                   |
|    | Yes Yes   |
|    | ☐ No  |
|    | Do not know   |
|    |   |
| C. | Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?  |
|    | Yes   |
|    | ☐ No  |
|    | Do not know   |
|    | If yes, which claim(s)?   |
|    |   |
|    | Participation in inmate programs & religious practices  |

|                                     | Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?   |
|-------------------------------------|---|
|                                     | X Yes   |
| ·                                   | □ No  |
|                                     | If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?   |
| •                                   | Yes   |
|                                     | □ No  |
| E.                                  | If you did file a grievance:  |
|                                     | 1. Where did you file the grievance?  |
|                                     |   |
|                                     | Morion County sail  |
| 7                                   | Morion County coil  2. What did you claim in your grievance? I claimed that the officers made me get rid and that later that afternoon the same two officers punished me as part of a smales who where Lalking in the covider when in fact I never left the invitabled in the corridor. I stated that it was not fair, unconstitutional and   |
|                                     | 2. What did you claim in your grievance? I claimed that the officers made me get rid and that later that afternoon the same two officers punished me as part of of immates who where Lalking in the coorder when in fact I never left the will  |
|                                     | 2. What did you claim in your grievance? I claimed that the officers made me get rid and that later that afternoon the same two officers punished me as part of immates who where Lalking in the covider when in fact I never left the anidalised in the corridor. I stated that it was not fair, unconstitutional and all the lay the mass the result, if any? The result was refusing their just first and all the way thru the appeal process and still theed is not a setisfactory residence. |
| s materic<br>le croup<br>leshional. | 2. What did you claim in your grievance? I claimed that the officers made me get rid and that later that afternoon the same two officers punished me as part of immates who where Lalking in the covider when in fact I never left the anidalised in the corridor. I stated that it was not fair, unconstitutional and all the lay the mass the result, if any? The result was refusing their just first and all the way thru the appeal process and still theed is not a setisfactory residence. |

| ı     | -                               |                                   |  |  |                           |                                    | _                            |                         |                     |                       |                      | ,                          |                            |
|-------|---------------------------------|-----------------------------------|--|--|---------------------------|------------------------------------|------------------------------|-------------------------|---------------------|-----------------------|----------------------|----------------------------|----------------------------|
|       | F.                              | If yo                             | u did no                               | file a gri                             | ievance:                  | ÷                                  |                              |                         |                     |                       |                      |                            |                            |
|       |                                 | 1                                 | if there a                             | re any re                              | asons why                 | you did                            | not file a g                 | grievance               | , state t           | hem her               | e: ·                 |                            | •                          |
|       |                                 | <del>,</del>                      |  |  |                           |                                    |                              | •                       |                     |                       | ••                   |                            |                            |
|       | -                               | - ,                               |  | •                                      |                           |                                    |                              | •                       |                     |                       |                      | - '.                       |                            |
|       |                                 | 1                                 | J/A                                    | * *                                    |                           |                                    |                              | x                       |                     |                       | ٠.                   | •                          |                            |
|       |                                 |                                   |  |  | a grievand<br>d their res |                                    | u did infor<br>any:          | m officia               | ls of yo            | ur clain              | , state v            | vho you i                  | nformed,                   |
|       |                                 |                                   | •                                      | •                                      |                           |                                    | · .                          |                         |                     |                       |                      |                            |                            |
|       |                                 |                                   |  |  | . *                       |                                    |                              | •                       |                     |                       |                      |                            |                            |
|       |                                 | 1                                 | V/A                                    |  |                           |                                    |                              |                         |                     |                       |                      |                            |                            |
|       |                                 | (Note                             | e: You m                               |  | n as exhibi               |                                    | vous to complaint            |                         |                     |                       |                      |                            | of your                    |
| VIII. | Previou                         | us Law                            | suits                                  |  |                           |                                    |                              |                         |                     |                       |                      |                            |                            |
|       | the filir<br>brought<br>malicio | ng fee i<br>t an act<br>ous, or f | f that pri<br>ion or ap<br>fails to st | soner has<br>opeal in a<br>cate a clai | on three court of the     | or more<br>he United<br>hich relie | I States that<br>of may be g | sions, wh<br>at was dis | nile inca<br>missed | arcerated<br>on the g | l or deta<br>grounds | ined in ar<br>that it is t | ny facility,<br>frivolous, |
|       | To the                          | best of                           | your kn                                | owledge,                               | have you                  | had a cas                          | e dismisse                   | d based o               | on this '           | three st              | rikes rul            | e"?                        |                            |
|       | Ye                              | es                                |  |  | -                         |                                    |                              |                         |                     |                       |                      |                            |                            |
|       | No.                             | O.                                |  |  |                           |                                    | •                            |                         |                     | •                     |                      |                            |                            |
|       | If yes, s                       | state wi                          | hich cou                               | rt dismiss                             | sed your ca               | ase, wher                          | n this occu                  | rred, and               | attach              | a copy o              | f the ord            | ler if pos                 | sible.                     |
|       | dona                            | » ·                               | NA                                     |  |                           |                                    | <b>,</b>                     | ·                       |                     | ,                     |                      |                            |                            |

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Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

| action?  |               |                 |               |              |                                       |        |
|--|---------------|-----------------|---------------|--------------|---------------------------------------|--------|
| Yes  |               |                 |               |              |                                       |        |
| No No  |               |                 | •             |              |                                       |        |
|  | •             |                 |               |              |                                       |        |
| If your answer to A is yes, of more than one lawsuit, desc |               | •               |               |              | _                                     |        |
|  |               |                 |               |              |                                       |        |
| 1. Parties to the previous l                               | lawsuit       |                 | •             |              |                                       |        |
| Plaintiff(s)   |               |                 |               |              |                                       |        |
| Defendant(s)   |               |                 |               | •            | · · · · · · · · · · · · · · · · · · · |        |
| 2. Court (if federal court,                                | name the dis  | trict: if state | e court. name | the county a | nd State)                             |        |
| 2. Court (y jouer at court,                                | ino dib       |                 |               |              |                                       |        |
|  | ı             | <del></del>     |               |              | * · _ · ·                             |        |
| 3. Docket or index number                                  | er            |                 |               |              |                                       |        |
|  |               | ٠.              |               |              |                                       |        |
| A. Name of Index assisms                                   | d to wow 000  |                 |               |              |                                       |        |
| 4. Name of Judge assigne                                   | d to your cas | ,               |               |              |                                       |        |
|  |               |                 |               |              |                                       |        |
| 5. Approximate date of fi                                  | ling lawsuit  | ·               |               |              |                                       |        |
|  |               |                 |               |              | ,                                     |        |
|  | -0 .          |                 |               |              |                                       |        |
| 6. Is the case still pending                               | <b>5</b> ?    | * '             |               |              |                                       |        |
| Yes  |               |                 | ,             |              |                                       |        |
| No   |               |                 |               |              |                                       |        |
|  |               | 1:              |               |              |                                       |        |
| If no, give the approximation                              | mate date of  | disposition.    |               |              | · · · · · · · · · · · · · · · · · · · |        |
| 7. What was the result of in your favor? Was the           |               |                 | Was the cas   | e dismissed? | Was judgme                            | ent er |
|  |               |                 |               | ×            |                                       |        |
|  |               |                 |               |              |                                       |        |
|  |               |                 |               |              |                                       | J.     |

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| Pro Se 14 (Rev. 12/1 | l6) Con | pplaint for Violation of Civil Rights (Prisoner)   |           |          |          |             |            |
|----------------------|---------|--|-----------|----------|----------|-------------|------------|
| ·                    |         | Yes<br>No  |           |          |          |             |            |
| D.                   |         | our answer to C is yes, describe each lawsuit by ans<br>the than one lawsuit, describe the additional lawsuits |           |          |          |             |            |
|                      | 1.      | Parties to the previous lawsuit  |           | ,        |          | r           |            |
|                      |         | Plaintiff(s)   |           |          |          |             |            |
| ,                    |         | Defendant(s)   |           | -        |          |             |            |
|                      | 2.      | Court (if federal court, name the district; if state co  | ourt, nam | e the co | unty ana | State)      |            |
| ,                    |         |  |           |          |          |             | ·.         |
|                      | 3.      | Docket or index number   |           |          |          |             |            |
|                      | 4.      | Name of Judge assigned to your case  |           |          |          | <u>.</u> .  |            |
|                      | 5.      | Approximate date of filing lawsuit   | *         |          |          |             |            |
|                      | 6.      | Is the case still pending?  Yes  |           |          |          |             | ÷          |
| ,                    |         | No No  |           |          |          |             |            |
|                      |         | If no, give the approximate date of disposition  |           | •        |          |             |            |
|                      | 7.      | What was the result of the case? (For example: Win your favor? Was the case appealed?)                         | as the ca | se dismi | issed? V | Vas judgmei | nt entered |
| :                    |         |  |           |          | ,        |             |            |
|                      |         | · · · · · · · · · · · · · · · · · · ·  |           | -        |          |             |            |

## IX. Certification and Closing

В.

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

2/7/0000

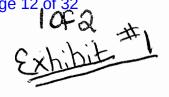
I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

| Date of signing.          | <u> 20,20                                 </u> |            |              |
|---------------------------|--|------------|--------------|
| Signature of Plaintiff    | Lotus & Smith                                  | 2          |              |
| Printed Name of Plaintiff | Loshua Levi Smit                               | h          |              |
| Prison Identification #   | 12680963                                       |            |              |
| Prison Address            | Marion County dail                             | -4000 Aums | sille How Se |
|                           | Salem  | OR         | 973170       |
|                           | City   | State      | Zip Code     |
|                           |  |            |              |
| For Attorneys             |  | •          |              |
| Date of signing:          | :  |            |              |
|                           |  |            |              |
| Signature of Attorney     |  |            |              |
| Printed Name of Attorney  |  | •          | i            |
| Bar Number                |  |            |              |
| Name of Law Firm          |  |            |              |
| Address                   |  |            |              |
| ,                         | •  |            |              |
|                           | City   | State      | Zip Code     |
| Telephone Number          |  |            |              |
| E-mail Address            |  |            |              |
|                           |  |            |              |

# Case 5:20-cv-00344-HZRIORDEHMENT SHERTIPE BARRA/20 Page 12 0 INSTITUTIONS DIVISION



# **INMATE GRIEVANCE FORM**



**INSTRUCTIONS:** Follow the rules in the Inmate Handbook regarding the facility's grievance procedures. Fill in the blanks in the first two sections. If you need more room, use additional sheets of paper, but not additional forms. If you want to grieve more than one issue, us a separate form for each issue.

| ٠                           | nt [] medical care [] general classification procedures [] general discipline procedures rograms [] religious practices [] telephone, mail & visiting procedures [] other (be specific) |
|-----------------------------|---|
|                             | ****************  |
| Inmate's Name: Abhun        | 1-evi Smith SID: 12680963 Cell: \$5-126   |
| Grievance: An Abn 17,       | 2020 at approximately 7:20 am I was advised after call Insportion   |
| - 4                         | ninee) that I'm only allowed one religious bank and three leigure   |
|                             | lalk with him and lot him know that I've read the Towards hand  |
|                             |   |
| Inmate Signature            | in it states any amount of books allowed in one's cell, however and the Date/Time: 10:00 1/18/20  |
| Receiving Deputy/Signatur   | e: # 118/20 1100)   |
| *******                     | *****************   |
| Daniel & Barrana Tag        | nate Handbook Prige 14 States   |
| Deputy's Kesponse: 1        | RECE FILL HOUR PILLS IN SILLES  |
|                             | le no more than three books in your cell at   |
| one time."                  |   |
| , parting (                 |   |
| Deputy's Signature: 15.     | Donuels # Date/Time: 1/23/20 0805   |
| Inmates signature accepting | deputy's resolution of grievance: Date/Time:  |
| *********                   | ********************  |
| Supervisor's Review:        | Date/Time Received: 1.24 24 24 Advan  |
| The Messing To              | CIPERT. The Prog CALY Allower ? Proport To a min  |
| 6911                        |   |
|                             |   |
| Ŷ                           |   |
| Supervisor's signature:     | 120 J# Date/Time: 1-211 34 6/41/6   |
| 7                           | g supervisor's resolution of grievance: Police Date/Time: 1 20 4/20   |
| ********                    | ******************************  |
| Administrator's Review:     | Date/Time Received: 1/29/20@ 0830   |
| A                           |   |
| The Beniti                  | 1 response is correct. The like book (learly  |
| 1407es Now                  | many books you are allowed  |
|                             | U .   |
| Administrator's signature:  |   |
| Inmates signature accepting | g administrator's resolution of grievance: Recuse. Date/Time: 129/20  |
| *****                       |   |

Distribution: White - Professional Standards Unit Inmate Grievance Form

Canary - Inmate File

Pink - Inmate

Cont:

I've been told by other deputies that three leasure books and as many religious study books within reason was standard rule. I stated it's my right to religious study and he became less Friendly and soid and quote (Im not going to get into a constitutional argument with you about religion) then instructed me to down size to Four books period. As I have Four religious books of my own property and three leisure books, I was forced to decide between the religious and leisure. As I go to put all the leisure books back on the shelf I ask the trainer Deputy (Mr. Danielson) for a grievance form and was instructed to do this during dayroom time. At dayroom I approached the desk and asked for a grievance form and was told that they were busy come back later. On Lan 18th, 2020 I was Finally able to secure a grievance form.



# **INMATE GRIEVANCE FORM**



**INSTRUCTIONS:** Follow the rules in the Inmate Handbook regarding the facility's grievance procedures. Fill in the blanks in the first two sections. If you need more room, use additional sheets of paper, but not additional forms. If you want to grieve more than one issue, us a separate form for each issue.

|            | *******                     | *****************************   |
|------------|-----------------------------|---|
|            |                             | ck one):  nt [] medical care [] general classification procedures [] general discipline procedures rograms [] religious practices [] telephone, mail & visiting procedures [] other (be specific) |
|            | ******                      | *********************   |
|            | Inmate's Name: Archun       | 1 aui Smith SID: 12680963 Cell: 55-126  |
|            | 6                           | a of approximately 2:50pm I was mailing in downan to note religious sorvices when   |
|            | Donald Shuh (Longo D Sal    | of another Erest 10 more where in care, when dock more rang Mr. Strik Traderucted all Inone   |
| Q          | return to their colla do    | to talking in the own. I was deviced services and nover left unit or talker   |
|            |                             | is use untrie however it was unconstitutional and unprofeshional.   |
| ,- ,       |                             | ad Smith # 19680963 Date/Time: 11:45 1/18/90  |
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|            | *******                     | ******************  |
|            | Denuty's Resnance: Thi      | group was returned due to disruptive condict  |
|            | in the hallway              |   |
|            | The namous                  |   |
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|            |                             |   |
|            |                             | g deputy's resolution of grievance: Refuse Date/Time: 🗚 //  |
|            | *******                     | ·   |
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|            | Supervisor's signature:     | <u> かって                                   </u>  |
|            | Inmates signature accepting | g supervisor's resolution of grievance: Refuse Date/Time: 1-84-20 4/20  |
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| 7          | Administrator's signature:  | 1.101 . 1 1.3 # Date/Time: 129/20 1331  |
|            |                             | g administrator's resolution of grievance: Resusso Date/Time: 1/29/2019 979   |
|            |                             |   |

|   | Cirievance Appeal Letter 2/1/2000   |
|---|---|
|   |   |
|   | Lail Commander,   |
|   | Im requesting an appeal on two  |
|   | grievances that were writen on the same day   |
|   | grievances that were writen on the same day just hours aport from one another, but of the |
|   | some religious nature and against the same  |
| _ | Marion County Sheriffs. One grievance was a   |
|   | participation in inmate programs and the other  |
|   | was a religious practice grievance. Please help   |
|   | me to resolve these as to live went all   |
|   | the way to administrative review without a  |
|   | resolve. Thank you for your time and help with  |
|   | these and hope to hear from you soon,   |
|   |   |
|   | Loshua L. Spiell  |
|   |   |
|   | /# 12680963<br>26shua Levi Smith  |
|   | 2051401 LEVI 201171)  |
|   |   |
|   |   |
|   |   |

# MARION COUNTY SHERIFF'S OFFICE

JOE KAST, SHERIFF

February 12, 2020

Joshua Smith SID: 12680963 Marion County Jail E5-126

Re: Grievance Appeal

Dear Mr. Smith:

I have received your request for appeal on the grievances you filed on 01/18/2020. In the first grievance you state you were denied religious services. In the second grievance you state you had four religious books and three leisure books in your cell. You say you were forced to choose between religious and leisure books. You say you should be allowed to keep all seven books in your cell and the Adult in Custody (AIC) handbook does not specify how many books you are allowed to have in your cell.

As answered on the first grievance. This program was canceled due to disruptive conduct. The Marion County Jail must maintain safe, orderly, operations. The program was canceled on this one date and will return on their next scheduled appointment.

As answered on the second grievance. The AIC handbook does address this on page 14. "You may have no more than three books in your cell at one time. This includes jail-issued and personal books." This can be any combination of books you choose. These books may change if you choose to change them.

Sincerely,

Tad Larson Commander

Marion County Jail

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# **Inmate Handbook**

DO NOT WRITE ON OR DAMAGE THIS HANDBOOK HANDBOOK MUST BE RETURNED IN GOOD CONDITION

An informational rule book for individuals lodged in the Marion County Jail

Marion County Sheriff's Office Institutions Division Marion County Jail 4000 Aumsville Hwy SE Salem, Oregon 97317

Revised 2019

Nowhere in this handbook does it state how many religious Books or Study items

#### INTRODUCTION

The Marlon County Jail (MCJ) is a direct supervision jail, serving as the adult jail for Marion County, Oregon. "Direct supervision" means that trained deputies will be in your housing unit throughout the day.

The two key ideas that guide our actions are (1) personal safety and (2) the assumption that you will behave positively and rationally.

It is our job to keep you safe and secure. It is your job to follow the rules and the staff instructions. Trained deputies will supervise you to ensure that you meet these expectations.

If you are accused of breaking a rule or not following staff instructions, you will have a chance to tell your side of the story to a hearings officer. If you are found guilty, you may lose privileges. However, the privileges granted to you will not be withdrawn without good reason.

This booklet tells you what is available to you while you are in jail and how we expect you to behave. From time to time, we may make minor changes to this book. The staff will notify you of these changes.

#### MANAGEMENT PRINCIPLES OF DIRECT SUPERVISION

- \*Competent staff-\*\*-we recruit, hire and train competent individuals who will perform their duties effectively, reflecting positively on the organization and the community.
- Classification and orientation—we use assessment tools and information systems that support
  systematic movement of the inmate through appropriate custody levels. We inform inmates of services,
  rules and rights in effect at the jail.
- 3. **Effective communication**—we make information available to staff in support of their job performance; staff make information available to inmates so that they can maintain themselves as contributing members of the community.
- 4. **Effective supervision**—we provide staff with a range of available sanctions and the authority to use them; staff apply rules consistently.
- 5. Justice and fairness --- we treat staff, the public and inmates in a fair and reasonable manner.
- 6. **Effective control**—we hold inmates accountable for their behavior and use only legal and necessary means to control their behavior.
- 7. Safety of the public, staff and inmates——we structure our operations to promote and maintain the safety of everyone coming into contact with the facility.
- 8. Manageable and cost-effective operations- conflict will be resolved at the lowest level. Inmates will be placed in the least restrictive classification possible in order to make productive use of their time.
- 9. **Staff ownership of operations**—we encourage and support staff interest and responsibility for safe, secure, orderly operation of the facility and the daily activities therein.

Revised 2019

#### MARION COUNTY SHERIFF'S OFFICE'S TOP 10 OBJECTIVES

These 10 objectives are the guiding principles behind the decisions we make as an Office:

- 1. Focus on employee safety as a first priority at all times;
- Focus on the legitimate, identified needs and priorities of the residents and visitors of Marion County;
- Demonstrate fiscal accountability through showing taxpayers a high return on the public funds entrusted to us;
- 4. Steadily contribute to the quality of life in our community by involving our citizens;
- Steadily enhance our relationships, communications, and mutually-beneficial partnerships;
- 6. Contribute to employee satisfaction by creating and maintaining an internal culture that values employee input, personal accountability, and recognition for a job well done;
- 7. Systematically work toward maintaining adequate, sustainable, dedicated funding for current and future Sheriff's Office operations, infrastructure, training and staffing;
- Support Marion County's economic growth and future direction by recruiting and retaining wellqualified, well-trained professional team members focused on public safety;
- 9. Focus on the highest professional standards of public safety and our core services within the resources provided to us;
- 10. Demand management excellence by ensuring we are planning for the future needs of our community and our employees.

#### **INMATE RIGHTS & PRIVILEGES**

You have the right to humane treatment. While living in the Marion County Jail, you will receive:

- meals certified by a nutritionist
- clean bedding and clothing
- the opportunity for regular showers
- proper ventilation
- opportunity for regular exercise
- hygiene items that will be charged to your trust account
- emergency medical and dental treatment that will also be charged to your trust account

Marion County is committed to maintaining an environment free from discrimination, and harassment based on protected classifications. We provide all employees with training regarding the roles and responsibilities of supervisors and employees in preventing and responding to discrimination and harassment, the fair and expeditious investigation and resolution of complaints, and the prohibition of retaliation.

- We will explain jail rules, procedures and schedules to you.
- You may visit with your family, friends, attorney and the media as allowed by rules and schedules.
- You may have an opportunity to participate in educational, vocational and work programs. Your custody status may affect your eligibility for these activities.

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# THE AMERICANS WITH DISABILITIES ACT

If you have a disability or handicap that affects your ability to see, speak, hear, walk or understand, you may ask for assistance or accommodation. Please submit an ADA Inmate Request form to the Pod Deputy. If you have questions about accommodations or wish to submit a complaint of discrimination, contact the "Administrative Sergeant" in writing.

# THE PRISON RAPE ELIMINATION ACT (PREA) of 2003 & CUSTODIAL SEXUAL MISCONDUCT

The Marion County Sheriff's Office maintains a zero-tolerance standard regarding custodial rape, sexual misconduct, sexual contact and sexual harassment between inmates or between inmates and staff. We want you to be safe while in the custody of the Marion County Jail.

All sexual and romantic activity between staff and inmates is prohibited and against the law. Sexual activity between inmates is also prohibited by facility rules and may be a crime. There is no such thing as consensual sex in custody.

The Sheriff's Office will aggressively respond to and investigate any and all allegations of rape, sexual misconduct or sexual harassment. The Sheriff's Office supports the prosecution of sexual misconduct and sexual assaults, in partnership with law enforcement and county prosecutors.

Sheriff's Office staff is required to report and respond to incidents of rape, sexual misconduct and sexual harassment. Inmates are encouraged to "Break the Silence of Abuse" and report sexual misconduct and sexual harassment to staff members.

If you are sexually abused or sexually harassed or know of someone that has been sexually abused or harassed, you need to report it immediately. Although reporting can be difficult to do, it will keep you and others safe from more harm. The person who caused the harm will not be able to continue to harm you or hurt others as staff becomes aware of such problems. Although the person who abused you may threaten to harm you in some way and you may be scared, make sure you report sexual abuse or harassment immediately. You may report complaints of sexual abuse and sexual harassment to our deputy sheriffs, our nurses, our mental health counselors, our contractors and even our volunteers as well as attorneys, family members and friends. It is appropriate to report victimization to any employee or to anyone whom you feel safe disclosing. We prohibit inmates and staff from retaliating against you if a report is made. If you are not fluent in speaking or writing the English language, hearing impaired or mute, we have staff or other resources to help us understand your complaint in the language of your proficiency.

The U.S. mail, inmate request forms (kytes), grievances, medical request forms are all appropriate ways to report victimization. We also have a PREA Hotline on the inmate phone system, please follow the directions upon picking up the phone receiver where you may file a complaint or leave information. You may also contact, anonymously if you choose, the Clackamas County Sheriff's Office by calling 503-722-6637, at no cost to you; or by way of mail by writing to:

PREA Coordinator Clackamas County Jail 2206 Kaen Rd. Oregon City, Oregon 97045

#### PREA Continued:

The Marion County Sheriff's Office is also working in conjunction with the Center for Hope and Safety which provides advocacy services, crisis intervention, referrals and information as well as other services to victims of sexual assault and harassment locally in the Salem area. They can be reached by phone at 503-399-7722. Calls will not be recorded, can be made anonymously, and are at no cost to you. You can also mail written correspondence to:

Center for Hope and Safety 605 Center St. NE Salem, Oregon 97301

Keep in mind, all information and complaints will be subject to verification by investigators and inmates will be held accountable for false claims. If you choose to wait to file a complaint or provide information until you are out of custody you may reach our PREA Compliance Manager at 503-584-6278.

**Keep yourself safe - take action:** Tell a staff member immediately if someone tries to isolate you, singles you out, gives you anything special, wants to trade or loan an item or offers you protection.

**How to avoid sexual abuse and harassment:** The only way sexual abuse and harassment can be prevented is when a person chooses not to sexually abuse or sexually harass. However, you can be safer by following these guidelines:

- Be aware of situations and people that make you feel uncomfortable
- Be aware of your surroundings and stay away from areas that are isolated
- Yell "No" or "STOP IT NOW"
- Walk and stand with confidence
- Report any knowledge you have of anyone being abused
- Report any knowledge you have of anyone abusing others
- Be aware of the transmission of sexually transmitted diseases due to sexual contact.

If you are sexually assaulted while in custody you will be offered medical and mental health treatment and counseling if you request it, at no cost to you.

For further information related to this topic, you may ask to review Marion County Sheriff's Office Policy #1151 SEXUAL MISCONDUCT WITH OFFENDERS) located at the deputy's desk in your living unit.

We want you to be safe in custody. Please help us keep you and others safe from custodial rape, sexual misconduct, Sexual contact and sexual harassment by reporting all incidents of such prohibited activity.

#### **EXPECTED BEHAVIOR**

- You will comply with staff orders and follow facility rules and schedules.
- You must follow the "cell-in" order quickly without question. When ordered to cell-in, go directly into your room (cell) and secure the door.
- When "Standing Headcounts" are announced in your living unit, you will make sure your ID card is in the
  cell door window. You will then stand in your cell, facing the cell door window, with your face and ID card
  visible for the deputy to see.
- You will respect jail property and the property of others.
- You will keep your sleeping area and the common (day room or recreation yard) areas in a clean condition.
- Individual "Pod Rules" may vary; check housing unit bulletin boards for pod-specific rules.
- We will deal with any unacceptable behavior firmly but fairly, which may result in a change in your custody status.

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Marion County Jail (nmate Handbook Postal Service Continued:

You may receive mail Monday through Friday except holidays. The Marion County Jail is not responsible for delays or errors on the part of the U.S. Postal Service in the delivery of mail.

All incoming postcards will be no larger than 5.5" by 8.5" and letters will not contain more than 10 items. You will not be allowed to receive blank pages, envelopes or postage stamps in the mail. You may have softbound books or magazines sent to you through the mail. These items must be sent from a publisher or book store. Only 3 books per package are allowed, if we receive packages containing more than 3 books the extra will be receipted and placed in your property.

The content of any items received must meet the mail rule regulations noted in the Mail Policy.

Undeliverable magazines that come to the Marion County Jail will be screened for appropriateness and then entered into the general population library or discarded, they will not be returned to the sender. Your mailing address is:

"Your name" and SID # Marion County Jail 4000 Aumsville Hwy. SE Salem, Oregon 97317

- You must put your return address (same as mailing address, above) on all outgoing mail. You may use postcards or paper and envelope purchased through commissary to send out mail. Envelopes purchased and marked as "legal mail" may only be used for legal/official mail. No other writing or drawing, besides the return and mailing addresses, will be allowed on the outside of the envelope or in the address section of the postcard.
- All incoming and outgoing mail with be searched. Leave envelopes unsealed when placing them in the mail boxes. Exception: Legal mail will be inspected and sealed by the deputy in your presence. If you wish to write to another inmate in the jail, use the U.S. Mail. You may not write or pass notes to other inmates in the jail. All incoming mall must include a complete return address and the inmate's name and SID number. Mail without those things will be returned to the sender or Post Office. Additions to mail, like stickers, paint, rubber inked stamps, colored pencil, crayon, correction, fluid, tape, glue, glitter, staples, paperclips, stains, perfume and lipstick are prohibited.

<u>Legal Mail</u>: Incoming legal mail must be clearly marked as "legal mail" on the envelope and the address of the sender must be typed or printed to indicate the source or origin. Incoming legal mail will be inspected for contraband in the presence of the inmate it is addressed to.

#### \*Out-going mail will be considered legal mail if it is addressed to:

The Sheriff Legal Aid Chiefs of Police
US Board of Parole Judges US Marshals Office

US Attorney General Attorney General of the State American Civil Liberties Union

Director of Bureau of Prisons Attorneys Public Officials acting in their official capacity

Note: Misrepresentation of "legal mail" is strictly prohibited and may result in disciplinary action. All legal mail will be mailed through the US Postal Service, including mail to the Marion County Courts. The librarian will grant inmate requests for postage only to the listed individuals or offices. All other requests will be denied and your letter will be returned to you without postage.

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<u>Programs:</u> Based on your custody level and classification, you may attend various programs, including community-based treatment, education and religious services. Watch your housing unit bulletin board for details. Most programs require that you sign up in advance. Program materials are to be kept neat. You are not allowed to take food, drink or commissary items to programs.

- Property & Inmate Funds: To release property, you must fill out and sign a property release form. Request
  this form from your pod deputy. Property can be picked up Fridays, Saturdays and Sundays. The release
  form must be turned in no later than the prior Tuesday in order to be processed in time.
- If you need glasses, you may order reading glasses from commissary or if you need prescription glasses, you may have your family/friends drop them off at the Visiting Desk for you Monday-Friday 8:00 AM to 5:00 PM. You may not transfer property or funds to another inmate. Exception: The shift supervisor may allow married inmates to transfer funds to each other. Depositing money to your inmate trust account: Your family and friends can make deposits to your account by mail, our kiosks, the telephone or the internet.
  - By mail, they can send a money order or cashier's check to:
     Secure Deposits
     P.O. Box 12486
     St. Louis, MO 63132
  - Checks or cashier's checks must be made payable to "Access Secure Deposits
    c/o Inmate's Name and SID# and Marion County Jail"
  - By phone, they can call 1-866-345-1884
  - Online, they can go to <u>www.inmatedeposits.com</u>
  - Or they can deposit funds at the kiosks located in the Visiting lobby or Bail Window of the Jail.

<u>Security Release (Bail)</u>: Bail is accepted at the Marion County Jail bail window only after business hours, on weekends and on holidays. Only cash is accepted here.

Bail is accepted at the Court Annex, 4000 Aumsville Hwy SE, Salem and the Marion County Court House, 100 High Street, Salem during business hours. They accept cash, credit cards and cashier's checks. The most current information regarding bail may be obtained from the Marion County Circuit Court and Marion County Sheriff's Office websites.

#### Visitation:

- The Visiting schedule is based on the first letter of your last name and the location you are living in. See the schedule posted in your living unit for more information.
- Exception: Your attorney may visit you at reasonable times. You may take legal paperwork to your attorney visit.
- Your visitors should call the Visiting desk at (503) 588-8588 for information regarding signing up for visits.
- When your visitor comes to sign up for a visit, they must provide valid photo identification, including date
  of birth, current address and signature.
- Visitors must be at least 18 years of age unless the visitor is your legal spouse. Then, your spouse must bring a copy of a valid marriage certificate when he or she visits.
- If your child is under 18 years of age, they may visit if accompanied by an adult. That adult will be responsible for the behavior of the child. Only one child may visit at a time.
- The parent or legal guardian of the minor must provide a valid birth certificate for the minor wishing to visit. If the minor is over 15 years of age, they must show a current student body card or other identification showing a recent picture, as well as their name.
- If you or your visitor becomes disruptive, we will terminate your visit.
- If you wish to not visit with someone, you must fill-out an Inmate Request informing our staff of this and submit it to the pod deputy. Your request will stay in effect for the entire current incarceration.

#### **Visitation Continued:**

- A visiting dress code will be enforced.
- The Marion County Sheriff's Office has the right to deny any nonprofessional visit without cause.
- · Non-professional visits are monitored, recorded and may be shared with law enforcement.
- When the announcement comes over the phone that "Visiting is over" you are to hang up the phone and return to your living area immediately.

#### **INMATE LIVING UNITS & OPERATIONS**

<u>Housing Assignments/Classification</u>: The Classification Deputy will review all inmates to determine housing assignments. Your classification is determined by your criminal history, current charges, staff observations, behavior, and incident reports. Reviews, if necessary, are conducted every 30 days.

Inmate workers do not have a right to work and may be relieved of their assignment without cause or explanation.

<u>Clothing and Linen:</u> Inmates receive clean clothing twice a week and linen once a week. If you abuse or damage your clothing or linen, you may receive disciplinary action, possible loss of the article, and/or be held financially liable.

- Request and wear the appropriate (neither too large nor too small) size clothing. If you are unsure of the right size, ask your pod-deputy.
- Do not walk on your pant leg cuffs. You may roll up pant legs to an appropriate length but do not "peg" cuffs or otherwise personalize your clothing.
- You may not write or draw on clothing or linen.
- Be fully clothed in properly fitting, unaltered clothing when in and outside of your cell.
- Do not roll your pant waist bands.
- Do not push up thermal/sweatshirt sleeves. If they are too long you may roll them up to one inch above your wrist.
- If you are a worker, always wear your white t-shirt when outside the pod.

Beds: Keep your bed neatly made for inspections and any time you are out of your room. It is expected that your bed will be made. The second blanket will be folded at the foot of your mattress. The third blanket is to be used as a mattress cover. The pod-deputy can advise you of the proper way to make and maintain your bed. Keep your bed neatly made until 6 p.m. If you choose to sleep before that time, do so under your top blanket only or with deputy permission. One blanket may be exchanged during linen exchange when blankets are available. It is your responsibility to rotate your blankets.

#### Personal Hygiene:

- Keep yourself clean. Shower at least twice weekly.
- You may be instructed to shower more often than twice a week.
- Soap, toothpaste, comb, etc. are provided, and you will be charged for these items. If you have no
  money, the cost will be posted as a debit on your trust account.
- You may have no more than two bars of soap, per person in your cell, and two rolls of toilet paper,
  per cell.

#### Sanitation:

- Keep your cell floor clean and free from all material except your property container.
- Hang your clothing neatly from the provided hooks, or keep it folded on your bed.
- Keep your windows, vents and walls free from all materials. Do not display photographs, cards, drawings or other items on the walls or bunk. Store these items in your property bag.

#### Sanitation Continued:

- Display your ID card in your cell window or as directed by the pod deputy.
- You will be expected to help clean the day room and recreation areas when it is your sections turn to clean. Check the cleaning schedule in the dayroom or ask the pod deputy.
- Do not take any food, beverage, towel or personal item into the exercise areas. ID cards and recreation equipment only.

Security: Jail rules and regulations exist for the safety and well-being of all staff and inmates.

- We will conduct frequent, unannounced searches and inspections.
- We do not allow you to be present during a search or inspection of your cell.
- When you leave or return to your living unit, we may search you for contraband.
- Walk to or from all areas of this facility in an orderly manner. Do not speak to other inmates when walking in the halls.
- Walk single file on the right hand side of the hallway.
- We do not allow loud or disruptive conduct.
- Use a blanket under all card games, domino games, etc. to keep the noise level down.
- If you tamper with or damage any safety device, we will pursue criminal charges against you. You will
  also be subject to discipline and charged for the cost of replacing the safety device.
- If you damage or destroy someone else's property, including County property, we will discipline you and may charge you to replace the item. We may also pursue criminal charges against you.
- If you are involved in a situation where the cell extraction team responds, you may be charged a
  fee. Additionally, criminal charges may be pursued against you. You will also be subject to discipline
  and may be charged for the replacement of any tools or devices used to gain control of any incident.
- If staff is injured as a result of having to use force, we may pursue criminal charges against you.
- If you assault staff, we may pursue criminal charges against you.

\*The Jail enforces a "No Tolerance" policy on gang or security threat group behavior/activity.

#### **MAJOR & MINOR RULE VIOLATIONS**

#### **MINOR Violations:**

The pod deputy or civilian staff will handle minor jail rule violations and may impose sanctions. Sanctions for minor rule violations are limited to:

- Suspended sanction.
- Probation up to 5 days
- · Verbal warning, reprimand or counseling.
- Loss of one recreation period.
- Restriction to your cell for up to 23 hours (general visits are still permitted).
- Extra work detail not to exceed two hours per day for one day.
- Loss of ID card commissary privileges for one shift.
- A change in your classification or housing assignment.

If you believe you are not guilty of the alleged violation, you have the right to have the matter decided by a supervisor. You must request to speak with a supervisor, "contesting" the minor, before signing the Minor Violation Form. The shift supervisor will then speak with you regarding the matter and make a finding. You will then receive a copy of the Minor Violation Form with the supervisor's findings and decision.

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#### The following types of prohibited conduct are examples of minor rule violations:

#### **Behavior** violations that disrupt routine facility operation:

- 1. Unauthorized telephone use, examples include using another inmate's pin, using another inmate to make calls or any other activity that circumvents the phone system.
- 2. Violation of pod rules or recreation yard rules
- 3. Not being fully clothed when out of your cell, during lock-downs, or when deemed appropriate.
- 4. Possession of excess facility-issued items
- 5. Any other behavior that disrupts the routine facility operation
- 6. Violation of probation imposed following a previous minor violation

## Safety & security violations that endanger or may endanger any person or property:

- 7. Being in an unauthorized area, examples include being in a cell you are not assigned to, crossing the red line to the deputy desk without permission or any other area designated by your unit deputy.
- 8. Using jail items for other than their intended purpose.
- 9. Unauthorized use of commissary or jail-issued items, such as loaning, borrowing, trading, sharing, giving or bartering any commissary or jail-issued item, including food and drink.
- 10. Horseplay that does or could endanger any person or property.
- 11. Any other conduct that endangers or might endanger any person or property.

#### Sanitation violations that affect or may affect facility cleanliness or personal health:

- 12. Failure to help in pod cleanup.
- 13. Failure to keep self or cell clean.
- 14. Placing any item on or in the walls, light fixtures, vents or windows.
- 15. Keeping food or drink (other than commissary / medically authorized) in your cell.
- 16. Possession of nuisance contraband.
- 17. Failure to wear sandals or shoes when out of the cell.
- 18. Any other behavior that affects the cleanliness of the jail or the health of another.

**Note:** We consider any *attempt* to violate a rule or *helping* another person to violate a rule the same as committing the violation.

#### **MAJOR Violations:**

Major violations are considered serious threats to safety, security or the orderly operation of the jail. In addition to jail sanctions, we may refer violations to the Marion County Sheriff's Office for possible criminal charges. We may charge you with more than one violation resulting from a single incident of misbehavior. We consider any *ullempt* to violate a rule or *helping* another person to violate a rule the same as committing the violation. If you believe you are not guilty of a violation, you have the right to a hearing see Hearings Process below.

#### We may impose the following sanctions for major violations of facility rules:

- Probation, not to exceed 30 days for each violation.
- Suspended sanctions, with probation, not to exceed 60 days.
- Extra work details not to exceed three hours per day for five days.
- Loss of commissary privilege, not to exceed 30 days for each violation.
- Loss of recreation yard privilege, not to exceed 30 days for each violation.
- Loss of personal visits, not to exceed 30 days for each violation.
- Disciplinary lock-down in cell not to exceed 3 days with 1 hour out each day.

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#### MAJOR Violations Continued:

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- Disciplinary segregation not to exceed 30 days for each violation or 60 days for all violations arising from one incident.
- Loss of inmate worker status for this period of incarceration.
- Recovery of the full cost of any intentionally damaged item.
- Loss of ORS good time.
- A change in your classification or housing assignment.

#### The following types of prohibited conduct are examples of major rule violations:

#### Behavior violations that seriously disrupt routine facility operation:

- 1. Disruptive conduct
- 2. Refusal to obey an order
- 3. Using obscene or abusive language or gestures toward another inmate or staff member
- 4. Disrespect or insubordination (as demonstrated by words or actions)
- 5. Assault on staff
- 6. Assault on another inmate
- 7. Fighting (mutual combat)
- 8. Threatening or intimidating another person
- 9. Sexual misconduct/assault (including exposing one's self to another, masturbating, sexual harassment, and/or consensual, non-consensual or forcible sex acts on or with another)
- 10. Throwing or projecting any item
- 11. Tattooing or body-piercing
- 12. Committing any criminal act
- 13. Faking illness or failure to perform assigned duties
- 14. Violation of probation imposed for a previous major/minor violation
- 15. Any other act that seriously disrupts routine jail operation
- 16. Graffiti "gang tagging" and application of other STG markings
- 17. Theft of an item
- 18. Interfering with staff responsibilities

#### Safety & Security violations, which do or might endanger or injure any person or property:

- 19. Making any false statement or report
- 20. Gambling
- 21. Encouraging or participating in a group demonstration
- 22. Violating identification procedures
- 23. Attempting to bribe staff
- 24. Giving or offering items of value to staff
- Smuggling, possession or use of dangerous contraband
- 26. Being in an unauthorized area (outside of living unit)

#### Major Violations - Safety & Security Violations Continued:

- 27. Escape or attempted escape
- 28. AWOL (Absent without Leave) by not returning from an authorized leave, or "pass"
- 29. Possession, distribution or manufacturing a controlled substance
- 30. Possession or manufacturing a weapon
- 31. Misuse of medications
- 32. Possessing or using another inmate's ID or commissary card
- 33. Interfering with any lock, safety device, alarm, sprinkler system, fire or rescue equipment or seeking information about any security practice or device.
- 34. Any other act that threatens the safety, security or orderly operation of the facility
- 35. Flooding your cell / dayroom via toilet, sink, and sprinkler head.

Hearings Process: If you are charged with a major rule violation, you have the following rights:

- Staff will give you written notice of the charges within 24 hours\* of the incident, discovery of the alleged violation or completion of investigation into the alleged violation.
- Staff will also give you a Notification of Hearing form, which they will request that you sign to acknowledge receipt of the form. Your signature is not an admission of guilt.
- You may, if you wish, waive your right to a hearing at this point. The hearings officer will then decide if you are guilty or not guilty.
- You may request witnesses and present evidence by requesting a Witness Form from the pod deputy, completing the form and returning it to the pod deputy before your scheduled hearing.
- You may, If you wish, appeal the hearing officer's decision in writing to the Institutions Lieutenant or their designee within 5 days after sanctions have been imposed (see Notification of Hearing for instructions).

NOTE: If you refuse to indicate whether you want a hearing or refuse to sign the form, you waive your hearing rights and the hearing officer will decide the case from the report. If you are reclassified for disciplinary issues, your commissary items will be receipted and placed into your personal property. You will not get them back please do not ask.

#### GRIEVANCE PROCEDURE

Any inmate at the Marion County Jail may file a grievance in an attempt to resolve issues and disputes. Inmates have 30 days from the date of the grieved incident to file a grievance. Upon submitting a grievance inmates need to state the basis for the grievance in as much detail as possible; this will include details of the location, involved staff and witnesses, the approximate date and time of the event being grieved and an explanation of what relief or remedy they are seeking. Improperly filed grievances, including late grievances, grievances that do not provide required information, grievances that raise more than one issue and grievances that do not include the inmate's suggested remedy will be denied by staff. The following are some examples of grievable issues:

Telephone, mail, and visiting procedures General classification issues Religious practices

Food service

PREA

Conditions of confinement Participation in inmate programs Medical Care Inmate trust accounts

If you want to have your grievance resolved you must follow the grievance procedure, before filing a grievance you must attempt to verbally resolve the problem with a Deputy. If you cannot resolve the problem with a Deputy you may request a grievance form, fill it out with the required information above and give it to a Depuly.

Once a grievance is filed, there are timelines that must be followed: An exception to these timelines is when a grievance is filed that is a perceived emergency situation. If the employee receiving the grievance perceives it as an emergency situation they will notify a supervisor and the supervisor will attempt to resolve the situation immediately.

<sup>\*</sup> This may be delayed due to circumstances surrounding the incident.

# Marion County Jail Inmate Handbook Grievance Procedure Continued:

- The involved employee is required to respond and return the grievance within 7 calendar days from the date received.
- If the inmate is not satisfied with the response from the involved employee, the inmate will have 7 calendar
  days from the date of receipt to submit a written appeal to the employee's supervisor.
- The supervisor is required to respond and return the grievance within 7 calendar days from the date received.
- If the inmate is not satisfied with the response from the supervisor, the inmate will have 7 calendar days from the date of receipt to submit a written appeal to the lieutenant.
- The lieutenant is required to respond and return the grievance within 7 calendar days from the date received.
- If the inmate is not satisfied with the response from the lieutenant, the inmate will have 7 calendar days from the date of receipt to submit a written request for review to the Institutions Division Commander or their designee.
- The Institutions Division Commander or their designee will have 14 calendar days from the date of receipt of the appeal to return the final response to the inmate.

<u>NOTE:</u> If you use the grievance system to harass another person, make false statements or intentionally try to manipulate the grievance procedure, you may be charged with a rule violation. If you use the grievance procedure excessively or for trivial matters, your grievance privileges may be limited or modified.

**NOTICE:** Tampering with, modifying, defacing or destroying facility issued property items or the facility itself is prohibited. Anyone who tampers with, modifies, defaces or destroys any part of this facility or any facility issued property items will be written on a major violation and subject to a monetary fine. They may also be charged with criminal mischief depending on the degree of damages. Criminal Mischief can range from a misdemeanor to a felony. If found guilty during the disciplinary proceeding and a fine has been assessed, it will be debited against and deducted from the inmate's trust account.

Revised 2019

## **FACILITY ORIENTATION AND POD RULES**

Additional rules may vary by living unit. Please check the dayroom bulletin boards. It is your responsibility to familiarize yourself with the pod rules. Failure to comply with any of these rules may result in disciplinary action.

- 1. Make your bunk before participating in dayroom activities.
- 2. Maintain noise control at all times. No loud talking, whistling, singing or yelling.
- 3. Do not talk while in the television viewing area.
- 4. Do not sit or place your feet on the backs of the blue chairs.
- If you are not assigned an upstairs cell, ask the deputy for permission to use the upstairs shower or phones.
- 6. Do not loiter on the upper tier.
- 7. Do not cross the red line around the deputy's desk without permission.
- 8. When a deputy calls your name, report immediately to the deputy.
- 9. At mealtimes and medication pass, use only your facility issued cup
- 10. Do not enter another inmate's cell.
- 11. While out of your cell, do not communicate with inmates who are secured in their cells.
- 12. Razors will be issued on Mondays, Wednesdays and Fridays. You will need to check them out from the deputy, use them and then return them during your dayroom time.
- 13. Maintain an orderly, sanitary cell at all times, and be prepared for cell inspections.
- 14. When you are in your cell, place your I.D. card in the cell door window.
- 15. Maintain control of your I.D. card when you are out of your cell.
- 16. You are not to possess excess facility issued items.
- 17. Keep your outside window to the cell and the cell door window clear and unobstructed.
- 18. You cannot have pop containers in your cell. Empty pop bottles will be considered nuisance contraband and must be placed in the recycle bins.
- 19. When a deputy enters your cell for inspection, step outside your cell door unless directed to do otherwise.
- 20. Except for commissary items, do not keep food or drink in your cell from mealtimes.
- 21. Mugs purchased through commissary are not allowed during mealtimes. Only 2 purchased mugs are allowed in your possession. Commissary items are not allowed at the tables during meal times. Food and drink are prohibited in the recreation yard.
- 22. Do not eat on carpeted areas. You may consume drinks in covered cups purchased through commissary.
- 23. Unless assigned to a clean up crew, cell in after finishing your meal.
- 24. Do not cover your head while sleeping or in bed.
- 25. You may have one property bag unless you are authorized, in writing by a deputy, to have an additional one. All of your items must fit in the bag.
- 26. If you are on a Lower Tier Status, you may not go upstairs to use the phones, shower, or attend visits.
- 27. If you have a "Keep Separate" from another inmate, you will not be eligible to work outside your living unit or attend programs. You will be escorted by a deputy anytime you leave your living unit.
- 28. You may have no more than three books in your cell at one time. This includes jail-issued and personal books. When you are done with your personal book, you may request that it be placed in your property or you may donate it to the Jail by sending it to the Law Library.
- 29. Issued legal boxes are allowed for legal work only. Personal items should be stored in your property bag.
- 30. Commissary exchanges are not allowed. You may not share food or commissary items with other inmates.
- 31. Physical contact between inmates is prohibited.

## **GLOSSARY**

| Appeal                 | Method inmates may use to request administrative review of the disciplinary hearing or grievance process   |
|------------------------|--|
| Attempt                | Any intentional act that constitutes substantial progress toward completing a particular violation   |
| Cell                   | Individual inmate living quarters, or "room" a cell may house one or more inmates  |
| Cell-in                | An order or directive given by staff to go directly into your cell and secure the door<br>This order is nonnegotiable at the time that it is given.  |
| Consensual             | Existing or made by mutual agreement   |
| Contraband             | <ol> <li>Anything that has not been issued by the facility, transferred to the inmate in an authorized manner or sold to an inmate through the facility commissary</li> <li>Any item which has been altered from its original use</li> <li>Any substance, weapon or item which federal, state or local laws prohibit a person, prisoner or inmate from possessing</li> <li>Any item which is evidence of an alleged crime</li> </ol> |
| Day room               | Open area in inmate living unit, which is used for individual, small and large group activities, including meals in some units   |
| Disruptive<br>Conduct  | Actions or words that if used by an inmate cause a disturbance or disruption among other inmates, or substantially interfere with the safe, secure and orderly operation of the facility   |
| Grievance<br>Procedure | A method inmates may use to resolve issues and disputes; see Grievance Procedure   |
| Hearings Officer       | A deputy or supervisor who acts as an impartial third party, responsible for conducting hearings for charges of inmate misconduct  |
| ID card                | Inmate identification card; includes full name, SID #, and photograph; when magnetically encoded, can be used in commissary vending machines   |
| Infirmary              | Inmate medical care unit; includes the office and clinic quarters as well as adjacent living unit  |
| Inmate                 | Any person incarcerated or detained in any facility who is accused of, convicted of, sentenced for or adjudicated delinquent for violations of criminal law or the terms and conditions of parole, probation, pretrial release, or diversionary program  |
| Inmate Worker          | An inmate, who has received instruction in specific, structured facility assignments, meets classification requirements and who has signed a worker agreement  |

MCJ

Marion County Jail, located at 4000 Aumsville Hwy SE, Salem, OR 97317

Nuisance

1) Items issued by the facility which have been obtained without authorization.

Contraband

- 2) Excess or stockpiled facility issued items
- Items issued by the facility which have been altered from their original state but do not immediately jeopardize the safety, security, and/or orderly operations of the facility

Prison Rape

Includes the rape of an inmate in the actual or constructive control of prison (jail) officials; "Rape" includes all sex acts and sexual fondling (touching of the private parts of another person for sexual gratification).

Staff

Corrections deputies, community corrections deputies, patrol deputies, supervisors and managers; treatment providers, medical personnel; food service, commissary, sanitation, maintenance and other civilian personnel employed by or volunteering their time with the Marion County Sheriff's Office

Tattoo

Markings or drawings on the skin, either temporary or permanent in nature

\*All information in this manual is subject to change.

Changes will be posted in your living unit.

You are encouraged to have family and friends visit the Sheriff's Office website for answers to questions regarding bail, court dates, SID #, mall, property releases, current charges, release dates and inmate fund accounts.

www.co.marion.or.us

DO NOT WRITE ON OR DAMAGE THIS HANDBOOK HANDBOOK MUST BE RETURNED IN GOOD CONDITION